D	A	pplication	orDe	ocket Num	ber			
	SMALL E		OR	OTHER THAN SMALL ENTITY				
1	RATE	FEE		RATE	FEE			
	BASIC FEE	385.00	OR	BASIC FEE	770.00			
	X\$ 9=		OR	X\$18=				
	X43=		OR	X86=				
	+145=		OR	+290=				
١	TOTAL	385	OR	TOTAL				
	SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY				
	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	X\$ 9=		OR	X\$18=				
	X43=		OR	X86=				
	+145=		OR	+290=				
•	TOTAL ADDIT. FEE		OR ADDIT, FEE					
•	ADDIT. FEE	<u> </u>	•	A0011.1 EE1				
	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	X\$ 9=		OR	X\$18=				
	X43=		OR	X86=				
	+145=		ŅΒ	+290=				
,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE				
	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	X\$ 9=		OR	X\$18=				

PATENT APPLICATION FEE DETERMINATION RECOR

Effective October 1, 2003

		Lilect	ive Octob	0, 1, 20								
CLAIMS AS		S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER SMALL		
TOTAL CLAIMS			4			-		TE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		C FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			/ minus 20= *		*		XS	9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 = *			X	13=		OR	X86=		
ML	ILTIPLE DEPEN	DENT CLAIM PE	ESÉNT			+1	45 <u>=</u>		OR	+290=		
* If	the difference	in column 1 is	less than ze	ro, enter	"0" in c	olumn 2	TC	TAL	785	OR	TOTAL	
	C	LAIMS AS A (Column 1)	MENDED - PART II ` (Column 2) (Column 3)			(Column 3)	SN	SMALL ENTITY			OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA	R/	TE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=	XS	9=		OR	X\$18=	
AME	Independent	*	Minus	***	· CL A144	=	X	3=	·	OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	45=		OR	+290=	
	1.						ADDI	OTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)	וטטו	. 1 6-6-		•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***	CLAINA	=	X	3=		OR	X86=	
L	PIRST PRESE	NTATION OF MU	JLI IPLE DEF	ENDENT	CLAIM		+1	1 5=		ОR	+290=	
							ADDI"	OTAL . FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4	3=		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										+290=	
t If the entry in column 1 is less than the entry in column 2 write "0" in column 3										OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												